Post Event Summary Report

Name of Event: Successful Aging: Mind/Body

Date of Event: June 16, 2005

Location of Event: Swayduck Auditorium, New School University, 65 Fifth Avenue,

New York, New York 10011

Number of Persons Attending: 150+

Sponsoring Organizations: Institute for Retired Professionals at the New School and Selfhelp Community Services Inc.

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INDEPENDENT AGING AGENDA EVENT WHITE HOUSE CONFERENCE ON AGING

June 16, 2005 – New York City

In a unique partnership, the Institute for Retired Professionals at the New School and Selfhelp Community Services Inc. a multi-service agency produced an Independent Aging Event. This event was designed to look to the future of aging services acknowledging the complex variety of services that are and will be required to help our elders remain productive, involved members of the community.

The Institute for Retired Professionals was formed in 1962 at the New School, once known as the "University in Exile" and which had been a haven for refugees from Germany who acted as faculty for programs that provided intellectually stimulating classes directed at adults. The unique concept of the IRP, the first on-campus program for older adults, was that members of the programs would utilize their varied educational backgrounds and experience to be both teachers and students in the program. Starting with only 18 students, more than 3,300 older adults have participated in this program.

Selfhelp Community Services Inc. is an agency providing community-based services to older adults ranging from affordable housing to home care, senior centers, Naturally Occurring Retirement Community programs, social adult day services, case

management and services to almost 4,500 Nazi victims, the largest such program in North America.

These two very different groups have a common history. Selfhelp was created in 1936 by faculty at the New School to help new immigrants fleeing Nazi Germany as they attempted to make an adjustment to the new world. Paul Tillich, the noted Existential Philosopher was on the New School faculty and was Selfhelp's first president. The IRP and Selfhelp have been attempting to form a partnership between the IRP's lifelong learning agenda and Selfhelp's clients.

This Conference, "Successful Aging: Mind/Body" has been designed to demonstrate that, as people grow older they must have a large variety of services if they are to remain comfortably and productively part of the larger community. As the numbers of older people increases with the entry of the baby boom generation into senior status, programs must reflect a new demographic.

<u>Introduction</u>

Based on testimony of Joanne Hoffman, Director of Housing of the New York City United Jewish Appeal, Federation of Jewish Philanthropies and input from the audience, we offer the following recommendations on Housing. Recognizing an increasing need for secure and affordable housing in the coming years due to the increasing number of baby boomers becoming seniors, affordable housing, especially in major urban areas like New York City, is our number one priority.

<u>Priority Issue</u>: Affordable housing for low and middle income seniors is essential if we hope to maintain seniors in the community rather than place them in less desirable and more costly institutions. Assisted living that is affordable for low and moderate income seniors is so limited that only a few not-for-profit agencies have been able to build such units. Waiting lists for affordable housing run as long as ten years and make it highly unlikely that most seniors requiring such help will ever get the housing they need. In places like New York City, even middle class seniors find it increasingly difficult to find affordable housing. Though there are major plans to build more middle income housing in the City, none has been specifically targeted to seniors.

<u>Barriers</u>: Land is so valuable in most urban areas that most available land goes to the highest bidder, normally a commercial developer. The commitment to Section 8 vouchers diminishes yearly. The government has proposed a one year allocation to a tenant for enhanced vouchers that protect tenants in buildings where the landlord has opted out of Section 8 and wants to charge market rate rent. Section 8 recipients are not protected under a Senate bill that would increase rent from a 30% of income cap to whatever housing authorities decide is the appropriate level. Section 202 housing commitment has remained flat for several years despite the increasing need for such housing and the Federal government is proposing that the funds for Section 202 be

further, drastically reduced. There are virtually no public funds available for assisted living and the federal government has not defined this form of senior housing nor made it, for the most part, eligible for any federal funding like through Medicaid though it is an important senior living alternative.

<u>Proposed Solution(s):</u> Provide adequate funding to cover all Section 8 vouchers currently in use and support efforts to devise a rational plan to implement regulatory and legislative changes in the Section 8 Program that restores credibility and stability to the program with the intent of paving the way for future growth.

Increase Section 202 funding since this program provides critical housing and supports for older adults and offers a cost effective and human alternative to expensive nursing home placements.

Permit Medicaid funding for low and moderate income seniors who require independent housing with services and keep assisted living as inexpensive as possible by supporting a social model rather than only a medical model. The Federal government should provide more incentives in the form of easements like tax credits for building of middle income housing.

Introduction:

Valerie Bogart, Elder Law attorney and Director of Selfhelp's Evelyn Frank Legal Resources Program addressed issues of Long Term Care and Jessica Walker, Policy Analyst of United Neighborhood Houses addressed isolation and mental Health. What we present is a combination of their recommendations and the recommendations of the audience.

<u>Priority Issue #2</u>: Over 35 million Americans are now age 65 or older: that number is expected to double by 2030. It is accepted that it is important to help seniors remain in their own homes as long as possible and, in order to do so, we must provide the services they require. These services include home care, in-home mental health services, preventive medicine including physical fitness and exercise, affordable drug programs and outreach to the homebound.

<u>Barriers:</u> Medicaid eligibility levels are so unrealistic that older people are unable to live on the income they must have to be eligible: yet they cannot afford to pay for long term care on their own. Moreover, limited funds are available to provide mental health services for seniors under Medicare and mental health services under Medicaid are threatened with termination in an attempt to save money. Too little attention is paid to the unpaid caregiver without whom it would be impossible to maintain many homebound people in their own homes. Long term care insurance remains prohibitively expensive.

<u>Proposed Solutions</u>: Benefits and cost-sharing should reflect the needs and economic circumstances of the people served by Medicaid. The Medicaid benefit package should be comprehensive and ensure that people are able to access required benefits. Needed medical services should be available to elders and other adults covered by the program whose low incomes make it impossible for them to afford significant out-of-pocket costs. Changes that would effectively deny access to needed care or saddle low income people with costs they cannot afford to pay are counter-productive.

We support an innovative change in Medicaid financing that balances the need for individuals to pay some of the cost of long term care while ensuring they do not impoverish themselves by having to spend down all of their assets. The older people who require long term care should pledge to pay a specific part of their assets for their care and, once having done so, should become Medicaid eligible.

Both Medicaid and Medicare should increase funding available for mental health services and for programs such as Adult Day Services that help prevent mental deterioration and premature institutionalization. Both Medicare and Medicaid should declare reimbursable programs such as preventive exercise, fitness programs and alternative approaches to medicine. Long term care insurance should be made affordable and some tax deductions should be provided for its purchase. The government should provide substantial tax incentives for unpaid caregivers as well as additional support services like caregiver's respite programs.

It is also essential that the Federal government enact the Positive Aging Act and that every effort is made to facilitate elder-friendly communities on the local level.

<u>Introduction</u>

Charlotte Frank, Vice President and co-founder of the Transition Network, addressed changes in the workplace and volunteerism which require legislative support.

<u>Priority Issue #3:</u> We are about to experience a huge demographic shift. By 2030 20% of the population will be over 65. Negotiating the world of aging will be vastly different and people who have lived their lives in the middle class will find their way-of-life threatened. There is a need for rethinking the workplace and the work week along with compensation systems, job-sharing, healthcare priorities, health insurance and how volunteer work is structured and integrated into the system.

The need to be rooted in a community increases as people age: this becomes increasingly so when people lose the support of the work community. We must explore alternative types of communities, such as grassroots communities, institutionally based communities, learning communities, craft communities, virtual communities and provision of informal supports necessary for positive aging.

<u>Barriers</u>: Programs are essential to counter the ageism that exists within the media, within organizations and within companies. The individual's fear of acknowledging aging derives from the failure to inform the community that older people constitute a viable potential workforce. While we have developed many innovative ways of keeping elders in the workforce, little attention has been paid to incorporating changes in work structure.

<u>Proposed Solutions</u>: The Federal government should begin to develop programs to include older workers in the work place through job sharing and innovative scheduling that are required, build and test models and innovative practices and fund pilots to test the efficacy of new approaches. The Federal government should fund research which looks at the impact of different types of communities on aging and should formulate strategies to strengthen these communities.

The Federal government should pay particular attention to the retirement needs of those who have retired from responsible positions and now seek and need new challenges in retirement. Programs should be developed by the Federal government to utilize the experience of the elderly for the benefit of the people. There should be programs designed to meet the social and mental health needs of seniors and their need for continued socialization.

The group seeks funding for intergenerational programs utilizing the skills of seniors as tutors and mentors. Cadres of senior workers should be used to oversee innovative projects for seniors related to services. There appeared to be strong interest in the Government's creating and funding positions similar to the way the WPA paid for certain projects.

Work structures should be changed to allow phased retirement by reducing days and/or hours, permitting shared jobs and a more flexible career ladder which would allow a gradual moving down. It is time to begin to view older people as a vital resource and as human capital that can be engaged to improve society at every level from regular employment through important volunteer activities.

Introduction

Barbara Ginsberg, Director of My Turn at Kingsborough Community College, City University of New York spoke about the need for increased lifelong learning opportunities for retirees.

<u>Priority Issue #4</u>: Older adult learning is an essential component of any plan addressing the needs of the increasing numbers of seniors. Older adults want to demonstrate their capacity for lifelong learning through continuing education programs and intergenerational activities. Statistics show that the ability to learn and be creative actually improves the health and well-being of seniors.

<u>Barriers</u>: The media often employs images of old age that stereotype older persons as peripheral, senile and unproductive. This creates negative attitudes and misconceptions regarding the capabilities of older persons. Older people are often seen as using up resources that could be otherwise used for more important programs and there is a sense that lifelong learning is wasted on the elderly.

<u>Possible Solutions</u>: There should be a national guarantee of research monies so that we are armed with information that enables us to plan to meet these needs and to fund older adult learning. There should be a publicity campaign that emphasizes the health benefits of older adult learning. This then would result in less cost to the government in the use of medical services, premature institutionalization and other expensive medical services.

Older adult learning should be marketed as a product to insurance companies who would the give discounts to older learners and to older adult residences that would provide older adult learning in their offerings.

Area agencies on aging should create partnerships with colleges and universities.

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